

Political Organization Report of Contributions and Expenditures

OMB No. 1545-1696

▶ See separate instructions.

A For the period beginning January 1, 2001 and ending March 31, 2001

B Check applicable boxes: ☐ Initial report ☐ Change of address ☐ Amended report ☐ Final report

1 Name of organization Local 68 Political Action Committee **Employer identification number**
22 : 2298372

2 Mailing address (P.O. Box or number, street, and room or suite number)
11 Fairfield Place

City or town, state, and ZIP code
West Caldwell, NJ 07006

3 E-mail address of organization
vgiblin@iuoe-68.org

4 Date organization was formed

5a Name of custodian of records
Committee

5b Custodian's address
same as above

6a Name of contact person
Vincent J. Giblin, Treasurer

6b Contact person's address
same as above

7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number

City or town, state, and ZIP code

8 Type of report (check only one box)

a ☒ First quarterly report (due by April 15)

b ☐ Second quarterly report (due by July 15)

c ☐ Third quarterly report (due by October 15)

d ☐ Year-end report (due by January 31)

e ☐ Mid-year report (Non-election
year only due by July 31)

f ☐ Monthly report for the month of: _____
(due by the 20th day following the month shown above, except the
December report, which is due by January 31)

g ☐ Pre-election report (due by the 12th or 15th day before the election)

(1) Type of election: _____

(2) Date of election: _____

(3) For the state of: _____

h ☐ Post-general election report (due by the 30th day after general election)

(1) Date of election: _____

(2) For the state of: _____

9 Total amount of reported contributions (total from all attached Schedules A)

9 None

10 Total amount of reported expenditures (total from all attached Schedules B)

10 5,826.00

**Sign
Here**

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

[Signature]
Signature of authorized official

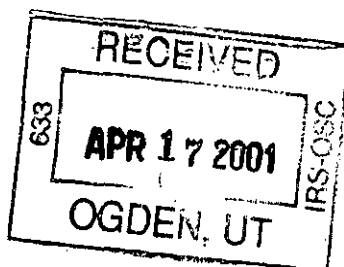
04/12/01

Date

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 30406G

Form **8872** (7-2000)



19

Schedule A Itemized Contributions		Schedule A page 1 of 1
Name of organization Local 68 Political Action Committee		Employer identification number 22 2298372
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Contributor's name, mailing address and ZIP code	Name of contributor's employer	Amount of contributions reported for this period
	Contributor's occupation	
	Aggregate contributions year-to-date . . . ▶ \$	\$
Subtotal of contributions reported on this page only. Enter here and also include this amount in the total on line 9 of Form 8872 ▶		\$ None

Schedule B Itemized Expenditures		Schedule B page 1 of 2
Name of organization Local 68 Political Action Committee		Employer identification number 22 : 2298372
Recipient's name, mailing address and ZIP code Atlantic County Democratic Comm. P.O. Box 1001 Mays Landing, NJ 08330	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 500.00
Recipient's name, mailing address and ZIP code Hudson County Community Fund 54 Washburn Street Jersey City, NJ 07306	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 500.00
Recipient's name, mailing address and ZIP code Middlesex County AFL-CIO Labor Council IBEW Local 456 1295 Livingston Ave. North Brunswick, NJ 08902	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 500.00
Recipient's name, mailing address and ZIP code Sen. Furnari Campaign 2001 596 Franklin Ave. Nutley, NJ 07110	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 600.00
Recipient's name, mailing address and ZIP code Election Fund of Sharpe James P.O. Box 20179 Newark, NJ 07101	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 500.00
Recipient's name, mailing address and ZIP code Doria Democratic Leadership Fd. P.O. Box 2007 Bayonne, NJ 07002	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 750.00
Recipient's name, mailing address and ZIP code Sen. Furnari Campaign 2001 596 Franklin Ave. Nutley, NJ 07110	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 600.00
Recipient's name, mailing address and ZIP code The Advocate 171 Clifton Avenue Newark, NJ 07104-9500	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 576.00
Recipient's name, mailing address and ZIP code Election Fund of Joe Brennan/ Surrogate 7 Hutton Avenue West Orange, NJ 07032	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 800.00
Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872.		\$ 5,326.00



Schedule B Itemized Expenditures

Schedule B page 2 of 2

Name of organization

Local 68 Political Action Committee

Employer identification number

22 2298372

Recipient's name, mailing address and ZIP code Campaign Fund of Gayle Chaneyfield-Jenskins 131-185 Bergen St. Newark, NJ 07102	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$ 500.00
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Recipient's name, mailing address and ZIP code	Name of recipient's employer Recipient's occupation	Amount of each expenditure reported for this period \$
Subtotal of expenditures reported on this page only. Enter here and also include this amount in the total on line 10 of Form 8872.		\$ 500.00

